

**APPLICATION DATA SHEET****Application Information**

Application number::

09421718

Filing Date::

10/20/1999

Application Type::

Regular

Subject Matter::

Utility

Title::

SYSTEM AND METHOD FOR  
INTERFACING A LOCAL  
COMMUNICATION DEVICE

Attorney Docket Number::

1128C

Suggested Drawing Figure::

FIG. 1

Total Drawing Sheets::

10

**Applicant Information**

Applicant Authority Type::

Inventor

Primary Citizenship

Country::

USA

Status::

DECEASED

Given Name::

JOSEPH

Middle Name::

MICHAEL

Family Name::

CHRISTIE

Applicant Authority Type::

Inventor

Primary Citizenship

Country::

USA

Given Name::

MICHAEL

Middle Name::

JOSEPH

Family Name::

GARDNER

City of Residence::

OVERLAND PARK

State or Providence of Residence::

KS

Country of Residence::

USA

Street of mailing address::	5307 WEST 100TH STREET
City of mailing address::	OVERLAND PARK
State or Province of mailing address::	KS
Country of mailing address::	USA
Postal or Zip Code of mailing address::	66207
Applicant Authority Type::	Inventor
Primary Citizenship	
Country::	USA
Given Name::	WILLIAM
Middle Name::	LYLE
Family Name::	WILEY
City of Residence::	OLATHE
State or Providence of Residence::	KS
Country of Residence::	USA
Street of mailing address::	814 NORTH MESA STREET
City of mailing address::	OLATHE
State or Province of mailing address::	KS
Country of mailing address::	USA
Postal or Zip Code of mailing address::	66061
Applicant Authority Type::	Inventor
Primary Citizenship	
Country::	USA
Given Name::	ALBERT
Middle Name::	DANIEL
Family Name::	DUREE
City of Residence::	INDEPENDENCE
State or Providence of Residence::	MO
Country of Residence::	USA
Street of mailing address::	16913 COGAN ROAD

City of mailing address:: INDEPENDENCE  
State or Province of mailing address:: MO  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 64055  
Applicant Authority Type:: Inventor  
Primary Citizenship  
Country:: USA  
Given Name:: TRACY  
Middle Name:: LEE  
Family Name:: NELSON  
City of Residence:: SHAWNEE MISSION  
State or Providence of Residence:: KS  
Country of Residence:: USA  
Street of mailing address:: 7103 MASTIN  
City of mailing address:: SHAWNEE MISSION  
State or Province of mailing address:: KS  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 66203

**Correspondence Information**

Correspondence Customer  
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**Representative Information****Representative Customer Number::****28004**

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
THIS APPLICATION	Continuation of	08/754,354	11/22/19996

**Assignee Information**

Assignee name::

SPRINT COMMUNICATIONS  
COMPANY, L. P.